



NAME OF GROUP/INDIVIDUAL: _____

DATE OF ESTABLISHMENT: _____

VILLAGE: _____ **PROVINCE:** _____

COMMUNITY: _____

NAME OF HEAD OF ORGANISATION: _____

CONTACT PERSON 1: _____

CONTACT PERSON 2: _____

PHONE NO: _____

E-MAIL: _____

FACEBOOK PAGE: _____

ARTS SPECIALITY:

VISUAL ARTIST FLORAL ARTIST FASHION DESIGNER TRADITIONAL DANCE (MEKE)

CONTEMPORARY DANCE MUSIC BAND COMPOSER

SIGNATURE: _____

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